

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

107586,946

FILING DATE

7-25-06

APPLICANT(S)

4-9-07 CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1		1	
2						
3				1		1
4				1		1
5				1		1
6				1		1
7				1		1
8				1		1
9				1		1
10				1		1
11				1		1
12			1		1	
13				1		1
14				1		1
15				14		1
16				1		1
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50						
TOTAL IND.		↓	3	↓	3	↓
TOTAL DEP.		←	27	←	14	←
TOTAL CLAIMS			30		17	

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						